# ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY



W-01959A Grandview Water Company, Inc. 11632 S. 194th Dr. Buckeye, AZ 85326



DORK COMM Theographics

# ANNUAL REPORT

FOR YEAR ENDING

12 31 2007

FOR COMMISSION USE

ANN 04 07

PROCESSED BY:

SCANNED

# **COMPANY INFORMATION**

Company Name (Business Name) Grandview Water Company, Inc.

94th Drive		
	_	
		5326
(State)	(Z	ip)
(623) 386-0967		
Fax No. (Include Area Code)	Cell No. (Incl	ude Area Code)
(Street)		
(State)	(Z	ip)
Fax No. (Include Area Code)	Cell No. (Inclu	ıde Area Code)
	Oper	rator
		·
Moss	·	,
		<b>₹</b> ₽₽₽₩
(City)	(State)	35208 (Zip)
(City)	(State)	(Zip)
(City) Fax No. (Include Area Code)	(State)  Cell No. (Included)	(Zip)
		(Zip)
Fax No. (Include Area Code)		(Zip)
		(Zip)
Fax No. (Include Area Code)	Cell No. (Includ	(Zip)
Fax No. (Include Area Code)  (Name)	Cell No. (Includ	(Zip) de Area Code)
Fax No. (Include Area Code)  (Name)  Buckeye	Cell No. (Includ	(Zip) de Area Code) 35326
Fax No. (Include Area Code)  (Name)  Buckeye	Cell No. (Includ	(Zip) de Area Code) 35326 (Zip)
Fax No. (Include Area Code)  (Name)  Buckeye (City)	Cell No. (Included Arizona (State)	(Zip) de Area Code) 35326 (Zip)
	Above (Street)  (State)  Fax No. (Include Area Code)  AGEMENT INFORMATI  Crowl - DC Sampling (Name)  Mesa,	(State) (Z  (623) 386-0967 Fax No. (Include Area Code) Cell No. (Include Areat)  (State) (Z  Fax No. (Include Area Code) Cell No. (Include Area No. (Include Area Code) Cell No. (Include Area Code)  (State) Cell No. (Include Area Code) Cell No. (Include Area Code)  (Name) Open (Name) (Title Code)

Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: Rhonda	Hogue		
	(Name)		
11632 South 194th Drive (Street)	Buckeye (City)	Arizona 85326 (State) (Zip)	
(623) 386-3713	(623) 386-0967	(State) (Zip)	
Telephone No. (Include Area Code)	Fax No. (Include Area Code	Cell No. (Include Area Code)	
Attorney:			
<del></del>	(Name)		
(Street)	(City)	(State) (Zip)	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)	N
Email Address			
Please mark this box if the abo	ove address(es) have changed or a	are updated since the last filing.	
	OWNERSHIP INFORMAT	9	
Check the following box that applie	es to your company:		
Sole Proprietor (S)	X C Corporation	a (C) (Other than Association/Co-op	<b>)</b> )
Partnership (P)	Subchapter S	Corporation (Z)	
Bankruptcy (B)	Association/Co	0-op (A)	
Receivership (R)	Limited Liabil	lity Company	
Other (Describe)			
	COUNTIES SERVED		
Check the box below for the county	/ies in which you are certificated to	provide service:	
□ АРАСНЕ	☐ COCHISE	☐ COCONINO	
☐ GILA	☐ GRAHAM	GREENLEE	
☐ LA PAZ	<b>X</b> MARICOPA	☐ MOHAVE	
☐ NAVAJO	☐ PIMA	☐ PINAL	
SANTA CRUZ	☐ YAVAPAI	☐ YUMA	
☐ STATEWIDE			

#### **UTILITY PLANT IN SERVICE**

Acet.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			, , , , , , , , , , , , , , , , , , ,
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			and the second
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	14,673	14,673	0

This amount goes on the Balance Sheet Acct. No. 108-

# **CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR**

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			, , , , , , , , , , , , , , , , , , , ,
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants		-	
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
-	TOTALS			N/A

This amount goes on the Comparative Statement of Income and Expense \_ Acct. No. 403.

#### **BALANCE SHEET**

Acct No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	ASSETS	YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$	\$
134	Working Funds		· · · · · · · · · · · · · · · · · · ·
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS		
		\$	\$
	FIXED ASSETS		
101	Utility Plant in Service	\$ 14,673	\$ 14,673
103	Property Held for Future Use	14,07)	14,0/3
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant	14,673	14,673
121	Non-Utility Property		21,075
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$ 0	\$ 0
	TOTAL ASSETS	\$ 0	<b>\$</b> 0

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

# **BALANCE SHEET (CONTINUED)**

Acct. No.		BEG	ANCE AT	E	ANCE AT
	LIABILITIES		YEAR		YEAR
	CURRENT LIABILITES				41
231	Accounts Payable	\$	·	\$	
232	Notes Payable (Current Portion)	Ψ	<del></del>	Ψ	
234	Notes/Accounts Payable to Associated Companies				
235	Customer Deposits	1			
236	Accrued Taxes				
237	Accrued Interest				
241	Miscellaneous Current and Accrued Liabilities				
	TOTAL CURRENT LIABILITIES	\$	0	\$	0
			<u> </u>	Ψ	
	LONG-TERM DEBT (Over 12 Months)				
224	Long-Term Notes and Bonds	\$		\$	
				Ψ	
	DEFERRED CREDITS				
251	Unamortized Premium on Debt	\$		\$	
252	Advances in Aid of Construction				
255	Accumulated Deferred Investment Tax Credits			···	
271	Contributions in Aid of Construction				
272	Less: Amortization of Contributions		-		
281	Accumulated Deferred Income Tax				
	TOTAL DEFERRED CREDITS	\$	0	\$	0
	·				
	TOTAL LIABILITIES	\$	0	\$	0
	CAPITAL ACCOUNTS				
201	Common Stock Issued	\$		\$	<del></del>
211	Paid in Capital in Excess of Par Value	Ψ		φ	
215	Retained Earnings				
218	Proprietary Capital (Sole Props and Partnerships)			<del></del>	
	TOTAL CAPITAL		0	\$	0
				<del></del>	-
	TOTAL LIABILITIES AND CAPITAL	\$	0	\$	0

# COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES		PRIOR YEAR	CUR	RENT YEAR
461	Metered Water Revenue	\$	0	\$	0
460	Unmetered Water Revenue		1,150	- 4	1,310
474	Other Water Revenues		10,809		5,075
	TOTAL REVENUES	\$	11,959	\$	6,385
	OPERATING EXPENSES				
601	Salaries and Wages	\$	0	\$	0
610	Purchased Water		0		0
615	Purchased Power		2,190		2,005
618	Chemicals		5		0
620	Repairs and Maintenance		5,798		920
621	Office Supplies and Expense		0,790		920
630	Outside Services		500		590
635	Water Testing		735		975
641	Rents			-	717
650	Transportation Expenses				
657	Insurance – General Liability				
659	Insurance - Health and Life				
666	Regulatory Commission Expense – Rate Case				
675	Miscellaneous Expense		2,277	<u> </u>	1,468
403	Depreciation Expense				
408	Taxes Other Than Income		75		72
408.11	Property Taxes		379		355
409	Income Tax		<u> </u>		
	TOTAL OPERATING EXPENSES	\$	11,959	\$	6,385
	OPERATING INCOME/(LOSS)	\$	0	\$	0
	OTHER INCOME/(EXPENSE)	-			77.
419	Interest and Dividend Income	\$	0	\$	0
421	Non-Utility Income	Ψ-	U	Φ	<u> </u>
426	Miscellaneous Non-Utility Expenses				
427	Interest Expense				
	TOTAL OTHER INCOME/(EXPENSE)	\$	0	\$	0
	NET INCOME/(LOSS)	\$	0	\$	0

# SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN	#1	LOAN #2	LOAN #3		LOAN #4
Date Issued	N/A		N/A	N/A		N/A
Source of Loan						
ACC Decision No.						
Reason for Loan						
Dollar Amount Issued	\$	\$	yls .	\$	\$	
Amount Outstanding	\$	\$		\$	\$	
Date of Maturity						
Interest Rate		%	%		%	%
Current Year Interest	\$	\$		\$	\$	
Current Year Principle	\$	\$		\$	\$	

Meter Deposit Balance at Test Year End	\$
Meter Deposits Refunded During the Test Year	\$

COMPANY NAME	Grandview Water Company, Inc.
Name of System:	ADEQ Public Water System Number:

#### WATER COMPANY PLANT DESCRIPTION

#### **WELLS**

Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
3	35	225	16	2 1/2	1952
	3				
		Horsepower (gpm)	Horsepower (gpm) Depth (Feet)	Horsepower (gpm) Depth Diameter (Feet) (Inches)	Horsepower (gpm) Depth Diameter (inches) (Feet) (Inches)

<sup>\*</sup> Arizona Department of Water Resources Identification Number

#### **OTHER WATER SOURCES**

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
N/A		

BOOSTER PUN	BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other	
5	1	5		

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
10,000	1	2,000	1

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	Grandview Water Company, Inc.
Name of System:	ADEQ Public Water System Number:

# WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS			
Size (in inches)	Material	Length (in feet)	
2			
3		1.665	
4		1,665 5,295	
5			
6			
8			
10			
12			

## CUSTOMER METERS

Size (in inches)	Quantity
5/8 X <sup>3</sup> / <sub>4</sub>	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	·
Tubo 4	
Comp. 6	
Tubo 6	

For the following three items, list the utility owned assets in each category for each system.

REATMENT EQUIPMENT:			
Automatic chlorinator			
	,		
`a			
STRUCTURES:			
N/A	78.		
		· · · · · · · · · · · · · · · · · · ·	
OFFICE			
OTHER:			
Well pump			
Booster pump			
Storage tank			
Pressure tank			

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	Grandview Water Company, Inc.
Name of System:	ADEQ Public Water System Number:

# WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2007

MONTH/YEAR	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	20		347.0	(Thousands)
FEBRUARY	20	347.0 387.4	387.4	
MARCH	20	355.3	355.3	
APRIL	20	409.5	409.5	
MAY	20	585.8	585.8	
JUNE	20	604.4	604.4	
JULY	20	727.6	727.6	
AUGUST	20	670.6	670.6	
SEPTEMBER	20	726.9	726.9	
OCTOBER	20	593.4	593.4	
NOVEMBER	20	611.6	611.6	
DECEMBER	20	387.7	387.7	
	$TOTALS \rightarrow $	6,407.2	6,407.2	N/A

What is the level of arsenic (If more than one well, please l	c for each well on your system?ist each separately.)	mg/l	
If system has fire hydrants,	, what is the fire flow requirement?G	PM for	hrs
	treatment, does this treatment system chlor  ( ) No	inate continu	ıously
Is the Water Utility located (X) Yes	in an ADWR Active Management Area (A) No	AMA)?	
Does the Company have ar	n ADWR Gallons Per Capita Per Day (GPC	CPD) require	ment?
If yes, provide the GPCPD	amount:		

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME Grandview Water Company, Inc.	YEAR ENDING 12/31/2007
PROPERTY TAXES	
Amount of actual property taxes paid during Calendar Year 2007 was: \$	355.01
Attach to this annual report proof (e.g. property tax bills stamped "paid i property tax payments) of any and all property taxes paid during the cale	in full" or copies of cancelled checks for endar year.
If no property taxes paid, explain why.	
·	
	j

# VERIFICATION AND SWORN STATEMENT Taxes

VERIFICATION

STATE OF Arizona

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)

Maricopa

NAME (OWNER OR OFFICIAL) TITLE

Rhonda Hogue, Treasurer

COMPANY NAME

Grandview Water Company, Inc.

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2007

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### **SWORN STATEMENT**

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

(623) 386-3713

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS SHA DAY OF
OFFICIAL SEAL
RUSSELL L. COLVILLE

NOTATE APUBLIC - State of Arizona MARICOPA COUNTY My Comm. Expires Jan. 3, 2010

MY COMMISSION EXPIRES 1/03

COUNTY NAME MACICORA

MONTH April ,2008

SIGNATURE OF OWNER OR OFFICIAL

SIGNATURE OF NOTARY PUBLIC

#### **INCOME TAXES**

For this reporting period, provide the following:

Federal Taxable Income Reported	0
Estimated or Actual Federal Tax Liability	0
State Taxable Income Reported	n
Estimated or Actual State Tax Liability	0
Amount of Grossed-Up Contributions/Advances:	

Amount of Contributions/Advances	0
Amount of Gross-Up Tax Collected	0
Total Grossed-Up Contributions/Advances	0

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

#### CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

	4-10-08			
SIGNATURE	DATE			
Mark Knister	President			
PRINTED NAME	TITLE			

## VERIFICATION AND WORN STATEMENT

	in the second	A Summer	
--	---------------	----------	--

	SWOR	N STATEME	NT		
AMD AND AND AND AND AND AND AND AND AND AN	<u>Intrasta</u>	ate Revenues Or	ıly	is the state	2 GONAM
VERIFICATION	COUNTY OF (COUNTY	Y NAME)		ALESTON	
STATE OF				alter Karring og blegdet	
I, THE UNDERSIGNED	NAME (OWNER OR OFFICIAL) TITLE				
OF THE	COMPANY NAME				
DO SAY THAT THIS ANNUAL U	TILITY REPOR	T TO THE ARIZ	ONA CORPO	RATION	COMMISSION
FOR THE YEAR ENDING	MONTH 12	DAY 31	YEAR 2007		
COVERED BY THIS RESET FORTH, TO THE EST FORTH, TO THE EST OF THE EST OF THE EST OF THE EST OPERATIONS OPERATIONS	BEST OF MY K  TH THE REQUED STATUTE  TE OF SAID U	NOWLEDGE, DUIREMENT OF S, IT IS HER UTILITY DERILENDAR YEAR	INFORMATI TITLE 40, EIN REPOR VED FROM R 2007 WAS:	ON AND ARTICLI ARTED TH ARIZON	BELIEF.  E 8, SECTION 40- AT THE GROSS NA INTRASTATE
		Arizona Intrastate	Gross Operating	Revenues On	ly (\$)
		(THE AMOUN INCLUDES \$	T IN BOX A	BOVE	
		IN SALES TAX	XES BILLED	, OR COI	LECTED)
**REVENUE REPORTED ON THIS PAGINCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REVENUE REPORTED ABOVE IN AGREE WITH TOTAL OPERATING FOR ELSEWHERE REPORTED, ATTACH STATEMENTS THAT RECONCILE TO DIFFERENCE. (EXPLAIN IN DETAIL	EASON, DOES NOT REVENUES THOSE HE	SIGNATUI	RE OF OWNER OR OFFI	CIAL	
MALE DELICOR (DAI DAIN IN DETAIL)		TE	ELEPHONE NUMBER	·	<u></u>
SUBSCRIBED AND SWORN TO BEFO	ORE ME				
A NOTARY PUBLIC IN AND FOR THI	E COUNTY OF	COUNTY NAME			
THIS	DAY OF	MONTH	,20	)	

SIGNATURE OF NOTARY PUBLIC

(SEAL)

MY COMMISSION EXPIRES

16

#### **VERIFICATION** AND **SWORN STATEMENT** RESIDENTIAL REVENUE

**Intrastate Revenues Only** 

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)	
Maricopa	
name (owner or official) Rhonda Hogue	Treasurer
COMPANY NAME	
Grandview Water Company Inc	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

MONTH DAY YEAR FOR THE YEAR ENDING 12 31 2007

> HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2007 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES	

\$ 6,385

THE AMOUNT IN BOX AT LEFT

INCLUDES \$

IN SALES TAXES BILLED, OR COLLECTED)

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

(623) 386-3713

TELEPHONE NUMBER

SIGNATURE OF OWNER OR OFFIC

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

DAY OF

Kussell L. Colville COUNTY NAME MANWOA

April MONTH

NOTARY PUBLIC NAME

2008

(SEAL)

MY COMMIS 1/03/2010

OFFICIAL SEAL RUSSELL L. COLVILLE NOTARY PUBLIC - State of Arizona PTP MARICOPA COUNTY
My Comm. Expires Jan. 3, 2010